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## BIB DATA SHEET

CONFIRMATION NO. 8353

<b>SERIAL NUMBER</b> 10/815,282	<b>FILING or 371(c) DATE</b> 04/01/2004 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 1787	<b>ATTORNEY DOCKET NO.</b> 4179-128		
<b>APPLICANTS</b> Tilak M. Shah, Cary, NC; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 06/16/2004						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /THAO T TRAN/ Acknowledged Examiner's Signature		<input type="checkbox"/> Met after Allowance tt Initials	<b>STATE OR COUNTRY</b> NC	<b>SHEETS DRAWINGS</b> 2	<b>TOTAL CLAIMS</b> <input type="checkbox"/> 35 40	<b>INDEPENDENT CLAIMS</b> <input type="checkbox"/> 2 4
<b>ADDRESS</b> INTELLECTUAL PROPERTY / TECHNOLOGY LAW PO BOX 14329 RESEARCH TRIANGLE PARK, NC 27709 UNITED STATES						
<b>TITLE</b> EXTRUSION LAMINATE POLYMERIC FILM ARTICLE AND GASTRIC OCCLUSIVE DEVICE COMPRISING SAME						
<b>FILING FEE RECEIVED</b> 1208	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			